



# **1115 Waiver Evaluation Components Update**

Len Finocchio, DrPH

# DHCS Overarching Goals

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Culture focused on quality, outcomes:

- Improve the health program members
- Enhance the patient care experience
- Control costs, and ensure value
  - Value measured as outcomes per dollar spent



# Evaluation Requirements

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Special Terms & Conditions requires evaluation design that includes:

- Outcome measures to evaluate impact of on target populations
- Effectiveness of using SNCP funding
- Analysis of how effects of Demonstration programs will be isolated from other initiatives in the State
- Quarterly and annual progress reports to CMS on evaluation design implementation



# Evaluation Components

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1. Low Income Health Program (LIHP)
2. Seniors and Persons with Disabilities (SPD)
3. California Children's Services (CCS) Pilots
4. Delivery System Reform Incentive Payments (DSRIP)



# Specific Evaluation Components



# LIHP – *Bridge to Reform*

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Monitor progress & “bridge” in four areas:

1. Outreach, enrollment, retention & transition
2. Coverage expansion
3. Access to, and quality of, care
4. System redesign in anticipation of 2014

UCLA Center for Health Policy Research

*Funding - Blue Shield of California Foundation*

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# LIHP – *Bridge to Reform*

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*Performance Dashboard* for counties:

- Enrollment
- Demographics
- Service utilization
- Quality of care (selected services)



# LIHP – *Bridge to Reform*

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## Issue briefs:

- Enrollment strategies into LIHPs
- Transition strategies to Medi-Cal/Exchange
- Characteristics of transition populations
- Delivery system innovations for 2014





# CCS Pilots

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## Outcomes for evaluation:

- Improvement in coordination and quality of care
- Reduction in rate of growth in spending
- Change in mix of services (e.g. reduction in ER & inpatient use; increased community-based services)
- Improvement in value/cost-effectiveness of care
- Improvement in patient and family satisfaction
- Increase in satisfaction with the delivery and reimbursement among providers



# CCS Pilot Evaluation

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- Proposal from UCLA Center for Health Policy Research
  - Incorporates Mathematica framework
- Funding - in discussion with Lucille Packard Foundation for Children's Health



# CCS Evaluation Approach

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- Quantitative assessment of outcomes
  - *Difference in difference* comparison between pilots
  - Patient/Family Experience survey
- Assess program implementation
  - Performance dashboard
- Qualitative analysis
  - Insights into bringing pilots to scale



# CCS Evaluation Reports

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- Family Centered Care Approaches
- Culturally & Linguistically Appropriate Care
- Best Practices for “Whole-Child” Approach
- Medical Home Assignment
- Care Coordination
- Quality Monitoring



# SPDs: Coordinated System of Care

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In discussion with UC San Diego

Possible funding - CA HealthCare Foundation

Overarching research areas:

1. Overall illness level of beneficiaries
2. Enrollee characteristics by plan
3. Preventive services use
4. Rates of ER & hospitalization



# DSRIP: Quality and Integration

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Document the gain from this investment:

- Tracking and QI for planning and implementation - Years 1-2 and ongoing
- Best practices/barriers – measure specific projects :
  - Improvements in patient outcomes
  - Movement toward integrated systems
  - Quality/cost for target populations

